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NONPROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE
Sandra B. Morrham

FILED

Jun 09 1997 8:00am

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

1997

DOCUMENT # 759055

1. Corporation Name

(7)

1200 CLUB CONDOMINIUM ASSOCIATION, INC.

1500 OFOR COMPONITATION VOCOCIVITION INC.						
Principal Place	e of Business	Mailing Address			ili Bibti bibit bibit didit bibti asbit sabt	
1200 NO ATLAN		1200 NO ATLANTIC BLVD FT LAUDERDALE FL 33304-1	726			
				3. Date Incorporated or Qualified 07/08/1981	3a. Date of Last Report 02/27/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-2108387	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Situ & State		City & State				
City & State		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23) Zip	Country	Zip	Country	8. This corporation has liability for in		
24	25		30	· '	Yes No	
	9. Name and Address of Curren			10. Name and Address of New Reg	istered Agent	
MARINO,	. HELGA		81 Name 82 Street Ad	ATHIS, DONA Idress (P.O. Box Number is Not Acceptable	1-D	
1200 N ATLANTIC BLVD. #11			120	1200 XI. ATLANTIC BLVD		
FT LAUD	DERDALE FL 33304		83			
			84 City	LAUDERDALE	FL 85 Zip Code	
11 Dureupnt t	to the provisions of Sections 617-060;	2 and 617 1508. Florida Statutes	s, the above-named co	proporation submits this statement for the pu	urpose of changing its registered	
TI. Fulloudin i	anistered exent or both in the Ctole	of Florida Such change was au	therized by the corner	ration's hoard of directors. I harehy acren	t the annointment as registered. I	
office or re	egistered agent, or both, in the State im amiliar with, and process the obliga-	of Florida, Such change was au work section 61 0503, Flor	Ithorized by the corporida Statutes.	ration's board of directors. I hereby accep	t the appointment as registered	
	I hand the	Mu D	JANDWA	orporation submits this statement for the puration's board of directors. I hereby accep	the appointment as registered	
SIGNATURE	Seasture, typed or printed name of registered age	int and title if applicable. (NOTE:	Registered Agent eignature rec	qured when reinstating)	01.97	
SIGNATURE	Specifice, typed or printed name of registered age OFFICERS AND	int and title if applicable. (NOTE: D DIRECTORS	Registered Agent signature ret	qured when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12	
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 of chapter 617, chapter 61